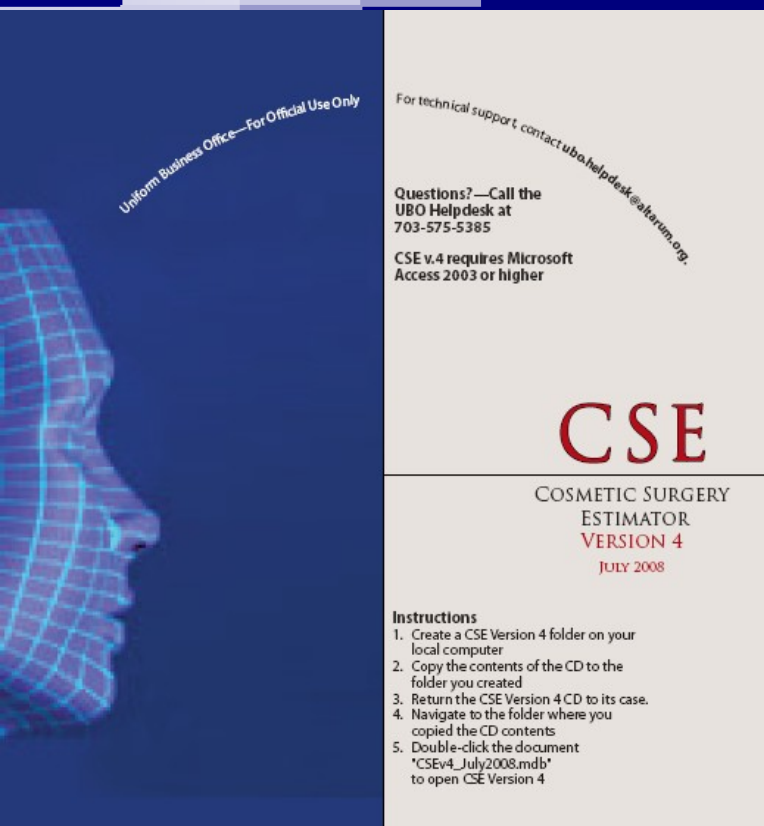




Health
Budgets &
Financial
Policy

Cosmetic Surgery Estimator (CSE) Version 4.0 Update



Webcast Link:

<http://altarum.acrobat.com/ubo/>

Audio Dial In: 1-866-866-2244

Participant code: 7519468#



Notice: Delayed Effective Date!

- The effective date for the OIB Rate Package, which includes the new UBO Medical and Dental Reimbursement Rates and Cosmetic Surgery rates, **originally set for July 7, 2008, has been delayed.**
- Therefore, CSE v. 4.0 should not be used to generate estimates until this OIB rate package becomes effective. Service Managers will be notified when this happens.



Agenda

- Background
- Purpose of the CSE
- CSE v4.0 Superbill Changes
- New Codes and Procedures
- CSE v4.0 Application Changes
- Practice Scenarios
- Introduction to CSE User Guide
- Questions

Background

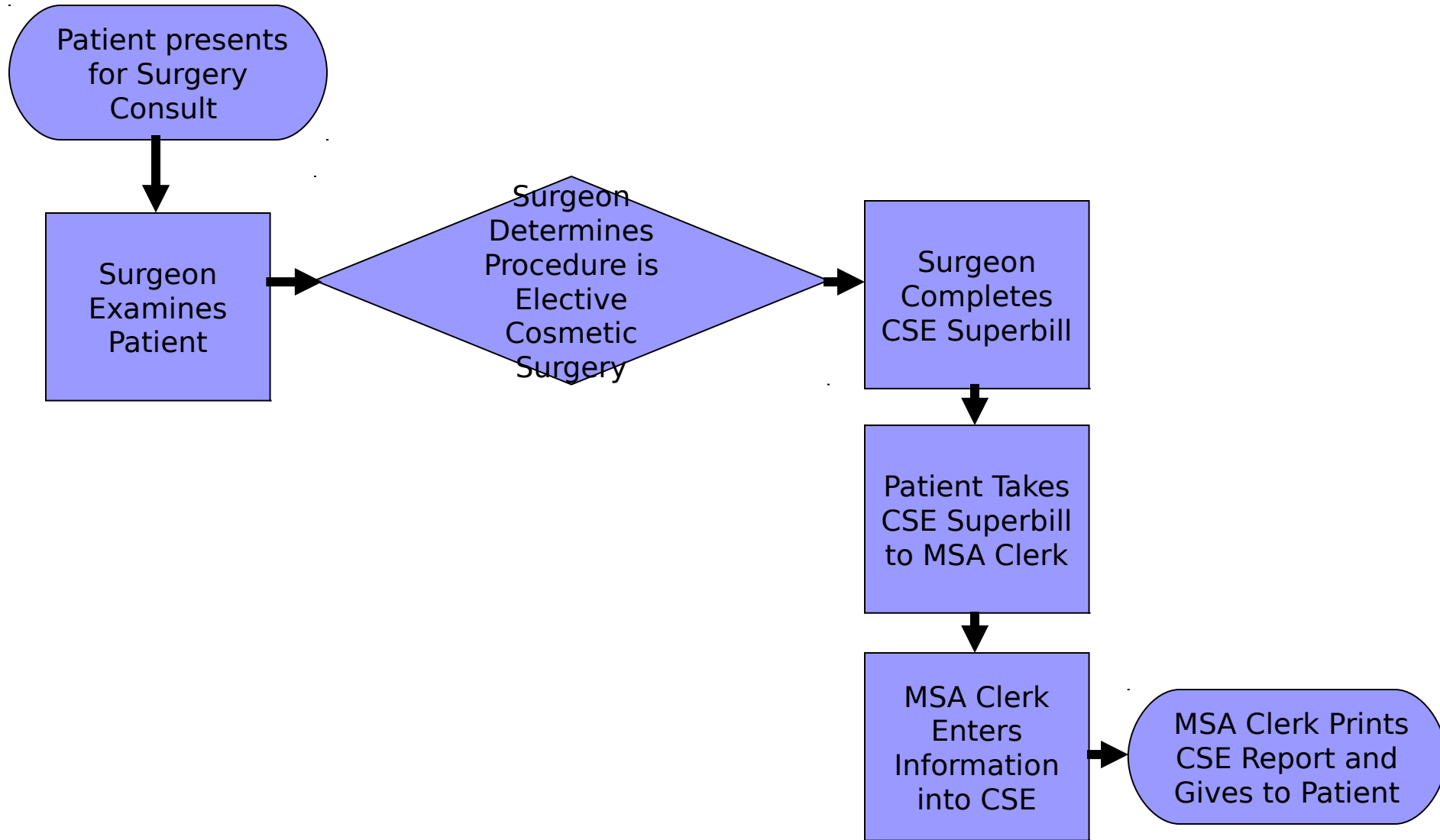
- Elective Cosmetic Surgery is **not** a TRICARE-covered benefit.
- **However**, DoD Health Affairs Policy 05-020 authorizes elective cosmetic surgery in military treatment facilities to “support graduate medical education, board eligibility and certification, and skill maintenance for certified cosmetic surgery providers.”
- Patients are responsible for payment in full for all cosmetic surgery procedures performed at the MTF.



Purpose of the CSE

- To simplify cosmetic surgery estimating and billing:
 - More accurate estimates
 - Consistent billing procedures
 - Automatic generation of estimates

The Basic Process



CSE v4.0 Superbill Changes

MTF:				Patient Name:			
Provider's Name and Phone:				Visit Date: / /		Surgery Date: / /	
ICD-9 Code 1:		ICD-9 Code 2:		Anesthesia: <input type="checkbox"/> Topical		<input type="checkbox"/> Moderate Sedation	
Location: <input type="checkbox"/> Office/Minor Surgery Room		<input type="checkbox"/> Operating Room Inpatient		<input type="checkbox"/> Monitored		<input type="checkbox"/> General Anesthesia Care	
		<input type="checkbox"/> Operating Room Outpatient		<input type="checkbox"/> Local Block		<input type="checkbox"/> None	
Procedure Description	Code	Bilateral	Quantity	Description	Code	Bilateral	Quantity
CHEMICAL PEEL				EXCISION, BENIGN LESIONS (con't)			
Chemical Peel; facial, epidermal	15788		1	FACE, MUCOUS MEMBRANES (con't)			
Chemical Peel; facial, dermal	15789		1	3.1 - 4.0 cm excised diameter	11444		
Chemical Peel; non facial, epidermal	15792		1	Over 4.0 cm excised diameter	11446		
Chemical Peel; non facial, dermal	15793		1	SCALP, NECK, HANDS, FEET, GENITALIA			
DERMABRASION				< 0.5 cm excised diameter	11420		
Total Face	15780		1	0.6 - 1.0 cm excised diameter	11421		
Segment, facial	15781		1	1.1 - 2.0 cm excised diameter	11422		
Regions, non facial	15782		1	2.1 - 3.0 cm excised diameter	11423		
Dermabrasion; superficial (e.g., tattoo removal)	15783		1	3.1 - 4.0 cm excised diameter	11424		
Abrasion; single lesion (e.g., keratosis, scar)	15786		1	Over 4.0 cm excised diameter	11426		
Abrasion; each addl 4 lesions or less	15787			TRUNK, ARMS, LEGS			
MICRODERMABRASION				< 0.5 cm excised diameter	11400		
Microdermabrasion; total face	17999-Y0001		1	0.6 -1.0 cm excised diameter	11401		
Microdermabrasion; segment, facial	17999-Y0002		1	1.1 - 2.0 cm excised diameter	11402		
LASER PROCEDURES				2.1 - 3.0 cm excised diameter	11403		
LASER RESURFACING - ABLATIVE				3.1 - 4.0 cm excised diameter	11404		
Laser skin resurfacing; total face	17999-Y0003		1	Over 4.0 cm excised diameter	11406		
Laser skin resurfacing; segment, facial	17999-Y0004		1	REPAIR, REVISION, SCAR			
LASER RESURFACING - NON-ABLATIVE				FACE			
Laser skin resurfacing; total face	17999-Y0005		1	1.1 - 2.5 cm	13131		
Laser skin resurfacing; segment, facial	17999-Y0006		1	2.6 - 7.5 cm	13132		

CSE v4.0 Superbill Changes

★ MTF:		Patient Name:	
Provider's Name and Phone:		Visit Date: / /	Surgery Date: / /
ICD-9 Code 1:	ICD-9 Code 2:	Anesthesia: <input type="checkbox"/> Topical	<input type="checkbox"/> Moderate Sedation
Location: <input type="checkbox"/> Office/Minor Surgery Room	<input type="checkbox"/> Operating Room Inpatient	<input type="checkbox"/> Monitored	<input type="checkbox"/> General Anesthesia Care
★	<input type="checkbox"/> Operating Room Outpatient	<input type="checkbox"/> Local Block	<input type="checkbox"/> None

Superbill: New Column Headings

INSTRUCTIONS: Circle/highlight **Procedure Description**; check **Bilateral** column (if applicable); and enter the **Quantity** of each applicable procedure.

Procedure Description	Code	Bilateral	Quantity
<div>CPT Code</div> <div>How many times will this procedure be performed?</div>			
CHEMICAL PEEL			
Chemical Peel; facial, epidermal	15788		
Chemical Peel; facial, dermal	15789	✓	2
Chemical Peel; non facial, epidermal	15792		1
Chemical Peel; non facial, dermal			1

Will the procedure be performed on both sides of the body or on paired organs (right & left)?

Procedure Description Changes

CPT Code	OLD Description (CSE v3.1)	NEW Description (CSE V4.0)
DESTRUCTION-LESION/WART		
PREMALIGNANT LESIONS		
17000	Excis/destroy benign skin lesion	Destruction; first premalignant lesion
17003	Excis/destroy benign skin lesion 2 to 14	Destruction; 2 – 14 premalignant lesions
17004	Excis/destroy benign skin lesion 15 or more	Destruction; 15 or more premalignant lesions
BENIGN LESIONS		
17110	Excis/destroy milia up to 14	Destruction; up to 14 benign lesions
17111	Excis/destroy milia 15 or more	Destruction; 15 or more benign lesions

CPT Code Changes

CSE V3.1 CPT Code	CSE v3.1 Description	CSE v4.0 CPT Code	CSE v4.0 Description
17999-15832- 50-15835-50	Total Lower Body lift with abdominoplasty	17999 + 15832 + 15835	Total Lower Body Lift (Abdominoplasty + Thigh Lift + Buttock Lift)
15832-50- 15835-50	Total Lower Body lift	15832 + 15835	Partial Lower Body Lift (Thigh Lift + Buttock Lift)
15877-51- 15878-51- 15879-51	Suction assisted lipectomy; Total Body; excluding head and neck	15877 + 15878 + 15879	Suction Assisted Lipectomy; Total Body , excluding head and neck

New Codes and Procedures

- Deleted Code:
 - 17999-Y1950 Botox Injection, per session
- Replaced with:
 - 64612 – 64614 Chemodenervation (*Includes cost of injection and Botox*)

Description	Code	Bilatera l?	Quantitative Procedure?
CHEMODENERVATION (Procedure performed by resident? Yes ■ No ■)			
Chemodenervation; facial	64612	No	No
Chemodenervation; neck	64613	No	No
Chemodenervation; extremity	64614	Yes	No

New Codes and Procedures

Description	Code	Bilatera l?	Quantitative Procedure ?
DERMABRASION			
Dermabrasion; superficial (e.g., tattoo removal)	15783	No	No
Abrasion; single lesion (e.g., keratosis, scar)	15786	No	No
Abrasion; each additional 4 lesions or less	15787	No	Yes

HAIR REMOVAL/TRANSPLANT			
Electrolysis Epilation; 30 minute session	17380	No	Yes

New Codes and Procedures

Description	Code	Bilateral ?	Quantity
INJECTIONS			
SUBCUTANEOUS INJECTION OF FILLING MATERIAL (Indicate filling material, quantity, and price below)			
1 cc or less	11950	No	
1.1 - 5.0 cc	11951	No	
5.1 - 10.0 cc	11952	No	
More than 10.0 cc	11954	No	
Filling Materials		Unit Price	Quantity
Radiance/Radiesse	J3490-01		
Restylane	J3490-02		
Zyderm	J3490-03		
Zyplast	J3490-04		
Other: _____	J3490	14	

Unit Price is determined by the individual MTFs. Dermal Fillers are local purchases and the price will vary by location.

CSE v4.0 Main Screen

Section 1:
Create an
Inquiry

Two actions are available for cosmetic surgery cost estimates:

1. ☐ New Inquiry: Enter procedure data into the yellow boxes below.
2. ☐ View Saved Inquiry: Click a previously saved inquiry name in the "View Saved Inquiry" box on the left below.

View Saved Inquiry
(click inquiry below)

Example_SaveInquiry

Section 3:
Save/Remove/Reset an
Inquiry

Save Inquiry

Remove Inquiry

Reset Inquiry

New Inquiry: Fill in the yellow boxes below...

Select By:	CPT Code	or	CPT Description	Costs		
1 & 2	What is the CPT/HCPCS Code?			Professional Fee: \$0.00		
3	Where will the procedure be performed?	<input type="radio"/> Office/Minor Surgery Room <input type="radio"/> OR/Outpatient <input type="radio"/> OR/Inpatient		Facility Costs: APC/ASC: \$0.00 DRG: \$0.00		
4	Will a dermatology resident perform the procedure?	<input type="radio"/> Yes <input type="radio"/> No	5	Will the procedure be bilateral?	<input type="radio"/> Yes <input type="radio"/> No	Bilateral Costs: \$0.00
6	Quantitative Procedures (Sessions):	0	7	Associated Procedure (each addl)	0	Conj Proc Costs: \$0.00
8	Will anesthesia be used?	<input type="radio"/> Topical <input type="radio"/> Monitored Anes Care <input type="radio"/> Local Block		<input type="radio"/> Moderate Sedation <input type="radio"/> General Anesthesia Care	Anesthesia Costs: \$0.00	
9	What filler will be provided by the clinic?		Price	Qty	Filler Cost: \$0.00	
10	Will additional procedures be performed at the same time?			<input type="radio"/> Yes <input type="radio"/> No	Multiple Costs: \$0.00	
11	Will implants or other non-covered supplies be supplied by the MTF? Include nomenclature and price if available.			<input type="radio"/> Yes <input type="radio"/> No	Implant Costs: \$0.00	
<input type="button" value="VIEW/EDIT Additional Procedures"/> <input type="button" value="VIEW/EDIT Implants/Drug"/>					Total Costs: \$0.00	

Cost Report

View Report

Print Report

Export Report

Section 2:
Generate a Report

Practice Scenario #1:

Chemodenervation

- A 50-year-old female requests Botox injections in her face for forehead for wrinkling and crows feet.
- The procedure will be performed:
 - 1) By a Dermatology Resident in the Provider's Office
 - 2) With Topical Anesthesia

Note: The Dermatology Resident Box is checked.

Description	Code	Bilateral?	Quantity
CHEMODENERVATION (Procedure performed by resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>)			
Chemodenervation; facial	64612		1
Chemodenervation; neck	64613		1
Chemodenervation; extremity	64614		1

Practice Scenario #2: Wrinkle Removal

- A 57-year-old woman request injection of a dermal filler for treatment of facial wrinkles.
- The procedure will be performed:
 - 1) In a the Provider's Office
 - 2) With Topical Anesthesia

Description	Code	Bilateral ?	Quantity
INJECTIONS			
SUBCUTANEOUS INJECTION OF FILLING MATERIAL (Indicate filling material quantity, and price below)			
1 cc or less	11950		
1.1 - 5.0 cc	11951		
5.1 - 10.0 cc	11952		
More than 10.0 cc	11954		
Filling Materials		\$60.00 Unit Price	4 Quantity
Radiance/Radiesse	J3490-01		
Restylane	J3490-02		
Zyderm	J3490-03	17	
Zyplast	J3490-04		

Unit Price is determined by the individual MTFs. Dermal Fillers are local purchases and the price will vary by location.

Practice Scenario #3: Multiple Procedures

- A 62-year-old man request surgery for sagging lower eyelids, hooded upper eyes, and drooping brows with horizontal lines.
- The procedure will be performed:
 - 1) In the Operating Room as an Inpatient Procedure
 - 2) With General Anesthesia

Description	Code	Bilatera l	Quantit y
REPAIR, REVISION AND/OR RECONSTRUCTION			
BLEPHAROPLASTY, BLEPHAROPTOSIS, CANTHOPLASTY			
Blepharoplasty; lower eyelid	15820	✓	1
Blepharoplasty; lower w/extensive herniated fat pad	15821		1
Blepharoplasty; upper eyelid	15822		1
Blepharoplasty; upper w/excessive skin	15823	✓	1
RHYTIDECTOMY			
Brow Lift	15823	✓	1

CSE v4 User Guide



Health Budgets &
Financial Policy

Uniform Business Office Elective Cosmetic Surgery User Guide

July 2008

To be used in conjunction with
Cosmetic Surgery Estimator, Release Version 4 (2008)

TABLE OF CONTENTS

INTRODUCTION

- Purpose
- Background
- Organization of This Document
- References
- Definitions

PROCESS OVERVIEW

- Description of the Process
- Process Flow

PROVIDERS GUIDE TO THE ELECTIVE COSMETIC SURGERY SUPERBILL BILLERS GUIDE TO THE COSMETIC SURGERY ESTIMATOR

- Tour of CSE Main Screens
- Overview of Operating the CSE

Appendix A: DoD Health Affairs Policy 05-020 – Policy for
Cosmetic Surgery Procedures in the Military Health System

Appendix B: “Spotlight” on Cosmetic Surgery Policy

Appendix C: Medical and Dental Reimbursement Rates and Pharmacy Rates

Appendix D: Sample Letter of Acknowledgement for Cosmetic Surgery

Appendix E: Cosmetic Surgery Estimator v4 Rate Table

Appendix F: CSE Training Guide

Appendix G: Bilateral, Associated, Inpatient, and Quantitative Procedures

Appendix H: Elective Cosmetic Surgery Superbill

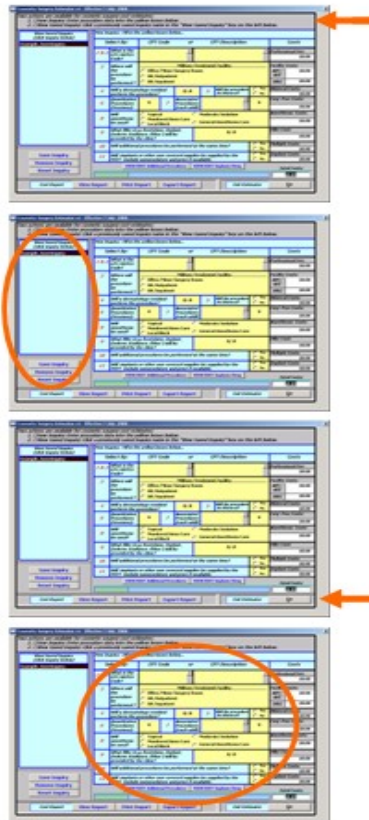
CSE v4 User Guide

In addition to simple instructions at the top of the screen, the main screen has three key areas:

(1) the left bar, where inquiries are saved, viewed, removed, or reset;

(2) the bottom bar, where reports are viewed, printed, or exported; and

(3) the main panel that has numbered sections for creating an inquiry.



The user completes the yellow cells for each section by (1) typing,

(As you type, a drop-down list appears from which you can select the procedure.)

(2) selecting from a drop-down list, or

(3) clicking a radio button.

Select By:	CPT Code	or	CPT Name
1 & 2	What is the CPT/HCPCS Code?		
	11400		Excisional benign skin lesion/trunk, arms or legs <0.5cm
	11401		Excisional benign skin lesion/trunk, arms or legs 0.6-1.0cm
	11402		Excisional benign skin lesion/trunk, arms or legs 1.1-2.0cm
	11403		Excisional benign skin lesion/trunk, arms or legs 2.1-3.0cm
	11404		Excisional benign skin lesion/trunk, arms or legs 3.1-4.0cm
	11406		Excisional benign skin lesion/trunk, arms or legs >4.0cm
	11420		Excisional benign skin lesion, at any depth, hand/d, foot, great, <0.5cm
	11421		Excisional benign skin lesion, at any depth, hand/d, foot, great, 0.6-1.0cm
	11422		Excisional benign skin lesion, at any depth, hand/d, foot, great, 1.1-2.0cm
	11423		Excisional benign skin lesion, at any depth, hand/d, foot, great, 2.1-3.0cm

☐ Yes
☐ No

Clicking the "Yes" radio button for Section 10 elicits the pop-up screen for specifying additional procedures.

Advanced Associated Procedures

2. Add or eliminate associated procedures by selecting a CPT code in the drop-down menu below.
 3. Enter a quantity for the procedure to be performed in the "Qty" box.
 4. If a "Filter" button is present, select a filter to be used in the "Filter" box.
 5. If a "Filter" button is present, select a filter to be used in the "Filter" box.
 6. If a "Filter" button is present, select a filter to be used in the "Filter" box.
 7. If a "Filter" button is present, select a filter to be used in the "Filter" box.

CPT Code	or	Select by Title	CPT Description	Qty	Filter	Filter	Unit Price	Qty
CPT Code		Description		Qty	Filter	Filter	Unit Price	Total Cost

Cost of Associated Procedures: 0.00

Questions



For Additional Assistance...

- Please contact the UBO Help Desk at
703-575-5385 or
ubo.helpdesk@altarum.org

